Case 19-05688-dd Doc 1-1 Filed 10/29/19 Entered 10/29/19 17:15:34 Desc Exhibit Petition part 2 Page 1 of 42

Fill in this in	nformation to ide	entify your case:		
Debtor	Jennifer Lee Stepp	p		
200.0.	First Name	Middle Name	Last Name	
Debtor 2	Matthew Ormiston	Coons		
(Spouse If filing)	First Name	Middle Name	Last Name	
United States Case number (If known)	Bankruptcy Court fo	or the District of South Carolina	\ <i>,</i>	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with wh	nom you	have the contract or lease	State what the contract or lease is for
2.1	Volkswagen Credit Inc			2019, Volkswagon Atlas
	Name 1401 Franklin Blvd			
	Street Libertyville	IL	60048	
	City	State	ZIP Code	
2.2	Jeffery Driesen			Residential Property lease for Debtors' home. Lessee
	Name 343 Clayton Dr			
	Street Charleston	SC	29414	
	City	State	ZIP Code	
2.3	Ally Financial			2017, Dodge Ram
	Name 200 Renaissance Ctr # B0			
	Street			
	Detroit	MI	48243	
_	City	State	ZIP Code	
2.4				
	Name			
	Street			
	City	State	ZIP Code	
2.5				
	Name			
	Street			_
	City	State	ZIP Code	_

	Case 19-05688-dd Doc 1-1 Filed 10/29/19 E Exhibit Petition part 2 Pa	ntered 10/29/19 17:15:34 Desc
Fill in this in	formation to identify your case:	gc 2 01 4 2
Debtor 1	Jennifer Lee Stepp First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing)	Matthew Ormiston Coons	
United States	Bankruptcy Court for the: District of South Carolina	
Case number (If known)		Check if this is an amended filing
Official F	Form 106H	•
Schedu	ıle H: Your Codebtors	12/15
1. Do you h No Yes 2. Within th Arizona,	(if known). Answer every question. ave any codebtors? (If you are filing a joint case, do not list either spouse a e last 8 years, have you lived in a community property state or territory California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Was to to line 3. Did your spouse, former spouse, or legal equivalent live with you at the time	? (Community property states and territories include shington, and Wisconsin.)
□N		
Ā	ame of your spouse, former spouse, or legal equivalent	-
N	umber Street	-
	ity State ZIP Code	-
shown in	n 1, list all of your codebtors. Do not include your spouse as a codebto line 2 again as a codebtor only if that person is a guarantor or cosign e D (Official Form 106D). Schedule E/F (Official Form 106E/F), or Sched	er. Make sure you have listed the creditor on

3	Scriedule E/F, or Scriedule G to fill out Col	umn 2.		
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1	Name			Schedule D, line
	-			Schedule E/F, line
	Street			Schedule G, line
	City	State	ZIP Code	
3.2				Schedule D, line
	Name			Schedule E/F, line
	-			
	Street			Schedule G, line
	City	State	ZIP Code	
3.3				
	Name			Schedule D, line
				Schedule E/F, line
	Street		· · · · · · · · · · · · · · · · · · ·	Schedule G, line
	City	State	ZIP Code	

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	EXHIBIT OF	ition part 2 1	uge 0 01 42	
Fill in this information to identify	your case:			
Jennifer Lee Ste	ерр			
First Name Matthew Ormist	Middle Name On Coons	Last Name	_	
Debtor 2 (Spouse, if filing) First Name		Last Name		
United States Bankruptcy Court for the:	District of South Carolina			
Case number		,	Check if t	his is:
(If known)				nended filing
				plement showing postpetition chapter 13 e as of the following date:
Official Form 106I				DD / YYYY
Schedule I: You	ır Income			12/15
supplying correct information. If ye	ou are married and not filir use is not filing with you, d e top of any additional pag	ng jointly, and your s lo not include inform	pouse is living with y ation about your spo	or 2), both are equally responsible for you, include information about your spouse. use. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed		Employed Not employed
Include part-time, seasonal, or self-employed work.	Occupation	Vet		Grocer
Occupation may include student or homemaker, if it applies.		Folly Road Ani	mal Hospital	Whole Foods Market Group
	Employer's name		 	
	Employer's address	1038 Folly Roa	ıd	550 Bowie St
		Number Street		Number Street
		Charleston, SC		Austin, TX 47755
	Uave lang applaced them	-	ate ZIP Code	City State ZIP Code
	How long employed ther	·e?		 -
Part 2: Give Details About	Monthly Income			
	•	. If you have nothing t	o report for any line w	rite \$0 in the space. Include your non-filing
spouse unless you are separated If you or your non-filing spouse ha	l. ave more than one employer	r, combine the informa		
below. If you need more space, a	ttach a separate sheet to thi	s form.		
			For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sal deductions). If not paid monthly,			\$ 8,900.00	\$ 2,919.63
3. Estimate and list monthly over	rtime pav.	3.	+ _{\$} 0.00	+ \$ 0.00

Official Form 106l Schedule I: Your Income page 1

4. Calculate gross income. Add line 2 + line 3.

8,900.00

2,919.63

		For Debtor 1	For Debtor 2 or non-filing spouse
Conviling 4 hours	→ 4.	\$ 8,900.00	\$ 2,919.63
Copy line 4 here	🔰 4.	Φ	Φ
• •	F.o.	¢ 0.00	_{\$} 266.07
5a. Tax, Medicare, and Social Security deductions	5a.	\$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b.	0.00	© 0.00
5c. Voluntary contributions for retirement plans	5c.	0.00	. Ψ
5d. Required repayments of retirement fund loans	5d.	Ψ	. Ψ
5e. Insurance	5e.	0.00	0.00
5f. Domestic support obligations	5f.	0.00	ο οο
5g. Union dues	5g.	Ψ	Ψ
5h. Other deductions. Specify: Child Life	_ 5h.	+\$	+ \$1.37_
		\$	\$
		\$	\$
		\$	\$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	5h. 6.	\$0.00	\$ <u>1,130.29</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_8,900.00	\$ <u>1,789.34</u>
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90	\$0.00	\$0.00_
monthly net income. 8b. Interest and dividends	8a. 8b.	\$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a deper		φ	Ψ
regularly receive	idoni		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$433.33	\$
8d. Unemployment compensation	8d.	\$0.00	\$0.00_
8e. Social Security	8e.	\$0.00	\$0.00_
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assis that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies. Specify:		\$0.00	\$0.00_
8g. Pension or retirement income	 8g.	\$ 0.00	s 0.00
	•	Ψ	Ψ
8h. Other monthly income. Specify:	8h.	'	- Ψ
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$433.33	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$ 9,333.33	+ \$\\ 1,789.34 \ = \\ \\ \\ \\ 11,122.68
11. State all other regular contributions to the expenses that you list in <i>Sc</i> Include contributions from an unmarried partner, members of your househol friends or relatives.			ommates, and other
Do not include any amounts already included in lines 2-10 or amounts that a	are not av	ailable to pay expe	
Specify:			11. + \$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. Write that amount on the Summary of Your Assets and Liabilities and Certa			applies 12. \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
			Combined monthly income
 13. Do you expect an increase or decrease within the year after you file the No. Income for Debtor 1 will likely decrease during Yes. Explain: 			·

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Debtor 1

First Name Middle Name Last Name

Case number (if known)_

Continuation Sheet for Official Form 106I

1. Describe Employment:

Debtor: Jennifer Lee Stepp

Occupation: Vet

Name of Employer: Oceanside Veterinary Clinic

Employer's Address: 1509 Folly Road, Charleston, SC 29412

Length of Employment:

Debtor: Jennifer Lee Stepp

Occupation: Vet

Name of Employer: Sweetgrass Animal Hospital

Employer's Address: 9730 Dorchester Road Unit 101, Summerville, SC 29485

Length of Employment:

Debtor: Jennifer Lee Stepp

Occupation: Vet

Name of Employer: Bees Ferry Animal Hospital

Employer's Address: 3422 Shelby Ray Court, Charleston, SC 29414

Length of Employment:

Official Form 106l Schedule I: Your Income

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Fill in this information t	o identify your case:			
Debtor 1 Jennifer Lee	Stepp	Check if th	in in	
First Name Matthew Orr	Middle Name Last Name niston Coons			
(Spouse, if filing) First Name	Middle Name Last Name	•	ended filing ement showing post	netition chanter 13
United States Bankruptcy Co	ourt for the: District of South Carolina		es as of the following	
Case number (If known)		MM / DE) / YYYY	
Official Form 10	<u>)6J </u>			
Schedule J	: Your Expenses			12/15
information. If more space (if known). Answer every	•			
Part 1: Describe	our Household			
1. Is this a joint case?				
_ No	live in a separate household? 2 must file Official Form 106J-2, Expenses for	or Senarata Household of Debtor 2		
		or Separate Flouseriold of Debtor 2.		
 Do you have depender Do not list Debtor 1 and 	Yes. Fill out this information f		Dependent's age	Does dependent live with you?
Debtor 2. Do not state the depend	each dependent ents'	Son	10	□ No ✓ Yes
names.		Son	2	□ No
				Yes
				No
				Yes
				□No □Yes
				No
				Yes
 Do your expenses incluence of people of yourself and your dependence. 	ner than			
Part 2: Estimate Yo	ur Ongoing Monthly Expenses			
Estimate your expenses	as of your bankruptcy filing date unless yo	ou are using this form as a suppler	ment in a Chapter 13	case to report
expenses as of a date aft applicable date.	er the bankruptcy is filed. If this is a suppl	emental <i>Schedule J</i> , check the bo	x at the top of the form	n and fill in the
	r with non-cash government assistance if	you know the value of		
	e included it on Schedule I: Your Income (•	Your expe	enses
4. The rental or home ov any rent for the ground	vnership expenses for your residence. Incl or lot.	ude first mortgage payments and	4. \$	1,950.00
If not included in line	4:			0.00
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeov	vner's, or renter's insurance		4b. \$	0.00
4- Home maintenan	on rapair and unknop avnopage		40 C	100.00

Homeowner's association or condominium dues

4d.

0.00

4d.

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Debtor 1

Jennifer Lee Stepp

First Name Middle Name Last Name Case number (if known)

			Your e	expenses
5. A (dditional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. U ʻ	tilities:			
68		6a.	\$	250.00
6k		6b.	\$	85.00
60		6c.	\$	450.00
60	d. Other. Specify:	6d.	\$	0.00
7. F (ood and housekeeping supplies	7.	\$	1,200.00
8. C	hildcare and children's education costs	8.	\$	1,950.00
e. C	lothing, laundry, and dry cleaning	9.	\$	400.00
). P (ersonal care products and services	10.	\$	210.00
1. M	edical and dental expenses	11.	\$	1,065.00
	ransportation. Include gas, maintenance, bus or train fare. o not include car payments.	12.	\$	500.00
3. E	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	500.00
i. C	haritable contributions and religious donations	14.	\$	0.00
	o not include insurance deducted from your pay or included in lines 4 or 20.			
15	5a. Life insurance	15a.	\$	130.00
15	5b. Health insurance	15b.	\$	0.00
15	5c. Vehicle insurance	15c.	\$	231.00
15	5d. Other insurance. Specify: Disability	15d.	\$	200.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	900.00
. In	stallment or lease payments:			
17	7a. Car payments for Vehicle 1	17a.	\$	301.00
17	7b. Car payments for Vehicle 2	17b.	\$	470.00
17	7c. Other. Specify:	17c.	\$	0.00
17	7d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as deducted from our pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
). O	ther payments you make to support others who do not live with you.			
	pecify:	19.	\$	0.00
). O	ther real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income) <u>.</u>		
20	Da. Mortgages on other property	20a.	\$	0.00
20	Db. Real estate taxes	20b.	\$	0.00
20	oc. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20	od. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	De. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	Jennifer L	ee Stepp			Case number (if kr	nown)		
	First Name	Middle Name	Last Name		, , , , , , , , , , , , , , , , , , ,	,		
1. Oth	er. Specify: Pro	fessional License	s, dues, and pro	fessional insurance.		21.	+\$	130.00
						21.	+\$	· · · · · · · · · · · · · · · · · · ·
							+\$	
2. Ca l	lculate your mo	nthly expenses.						
22a	. Add lines 4 thro	ough 21.				22a.	\$	11,022.00
22b	. Copy line 22 (n	nonthly expenses	for Debtor 2), if	any, from Official Form	106J-2 22c. Add line 22a	22b.	\$	
and	22b. The result	is your monthly e	xpenses.			22c.	\$	11,022.00
3. Calc 23a.	-	thly net income. Your combined me	anthly income) fr	om Schedule I		23a.	\$	11,122.68
23b.		nthly expenses from	,			23b.	- 9	11,022.00
							Ψ	
23c.		nonthly expenses our <i>monthly net ir</i>	-	hly income.		23c.	\$	100.68
	•	•						
4. Do y	ou expect an ir	crease or decre	ase in your exp	enses within the year	after you file this form?			
				ır loan within the year o				
		increase or deci	ease because of	a modification to the to	erms of your mortgage?			
✓ N								
☐ Y	es. Explain	nere:						

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Jennifer Lee	Stepp Middle Name	Last Name	
Debtor 2 (Spouse, if filing)		miston Coons Middle Name	Last Name	
United States	Bankruptcy Court f	or the District of South Carol	lina	
Case number (If known)				

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
dor populty of poriury I doclare that I	have read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I t they are true and correct.	have read the summary and schedules filed with this declaration and
	have read the summary and schedules filed with this declaration and Solution Solution

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Fill in this in	nformation to ider	ntify your case:	
Debtor 1	Jennifer Lee Step	p	
	First Name	Middle Name	Last Name
Debtor 2	Matthew Ormiston	Coons	
(Spouse, if filing) First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the: District of South Carolina	a
Case number (If known)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

Part 1	Give Details About	t Your M	larital Statı	us and	Where Yo	u Lived Before		
1. Wha	t is your current marital s	status?						
	Married Not married							
	ng the last 3 years, have No Yes. List all of the places y		·		·			
	Debtor 1:		,	Date	s Debtor 1 there	Debtor 2:		Dates Debtor 2 lived there
						Same as Debtor 1		Same as Debtor 1
	110 Brynmoor Court			From	06/2016	N. de Ord		From
	Number Street			То	06/2018	Number Street		То
	Goshen	СТ	06756					
	City	State	ZIP Code			City	State ZIP Code	
						Same as Debtor 1		Same as Debtor 1
	50 S. Battery Street			From	01/2018			From
	Number Street			То	01/2018	Number Street		To
	Apt B							
	Charleston City		29401 ZIP Code			City	State ZIP Code	
and	territories include Arizona,	, California	a, Idaho, Loui	isiana, N	Nevada, Nev	v Mexico, Puerto Rico, Tex	operty state or territory? (<i>C</i> as, Washington, and Wiscon	ommunity property states nsin.)

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Jennifer Lee Stepp Debtor 1 Case number (if known) Part 2: **Explain the Sources of Your Income** 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No ✓ Yes. Fill in the details. Debtor 1 Debtor 2 Gross income Sources of income Sources of income Gross income (before deductions and (before deductions and Check all that apply. Check all that apply. exclusions) exclusions) Wages, commissions. Wages, commissions, From January 1 of current year until \$70,000.00 \$ 22,253.39 bonuses, tips bonuses, tips the date you filed for bankruptcy: ☐ Operating a business Operating a business Wages, commissions, ■ Wages, commissions, For last calendar year: bonuses, tips bonuses, tips \$3,292.00 \$0.00 (January 1 to December 31, 2018 Operating a business Operating a business Wages, commissions, ■ Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips \$41,544.00 \$0.00 (January 1 to December 31, 2017 ☐ Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, For the calendar year before that: (January 1 to December 31,

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Debtor 1 Jennifer Lee Stepp Case number (if known) Case number (if known)

Part 3:	List	Certain Paym	ents You	Made Befor	e You Filed	for Bankruptcy				
6. Are eith	ner De	btor 1's or Deb	tor 2's debt	s primarily co	nsumer debt	s?				
☑ No.		Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?								
	Duri	ng the 90 days b	efore you file	ed for bankrup	tcy, did you pa	ay any creditor a total of	\$6,825* or more?			
	V 1	No. Go to line 7.								
	t	he total amoun	it you paid th	nat creditor. Do	not include p	\$6,825* or more in one ayments for domestic suents to an attorney for the	upport obligations, such			
	* Su	bject to adjustme	ent on 4/01/2	22 and every 3	years after th	at for cases filed on or a	after the date of adjustment.			
∏ Ves	: Dah	tor 1 or Debtor	2 or both ha	avo nrimarily (consumar dal	hte				
— 103						ay any creditor a total of	\$600 or more?			
			ciore you iii	ca for barikrap	itoy, ala you pe	ay any oreator a total or	φοσο οι more:			
	ш	No. Go to line 7.								
	□`	creditor. Do	not include	payments for o	domestic supp	\$600 or more and the to ort obligations, such as ey for this bankruptcy can				
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
						\$	\$	□ Madaana		
		Creditor's Name				Ψ	Ψ	☐ Mortgage		
								Car		
		Number Street						Credit card		
								Loan repayment		
								Suppliers or vendors		
		City	State	ZIP Code				Other		
	-									
						\$	\$	☐ Mortgage		
		Creditor's Name				,				
								∐ Car		
		Number Street						Credit card		
								Loan repayment		
								Suppliers or vendors		
		City	State	ZIP Code				Other		
		Creditor's Name				\$	\$	Mortgage		
		Orcator 3 Name						☐ Car		
		Number Street						Credit card		
								Loan repayment		
								☐ Suppliers or vendors		
		·						Other		
		City	State	ZIP Code						

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Case number (if known)_

Jennifer Lee Stepp

Debtor 1

<i>Inside</i> corpo agent	orations of which you are	; any gene an officer, iness you o	ral partners; ro director, pers	elatives of any gon in control, or	general partners; p owner of 20% or r	artnerships of which	ho was an insider? h you are a general partner; securities; and any managing domestic support obligations,
J N I Y	lo 'es. List all payments to a	n insider.					
				Dates of payment	Total amount paid	Amount you still owe	
	DECO Associates Insider's Name			06/2018	\$ <u>16,550.00</u>	\$_250,000.00	Business loan repayments. Payments were made from Jemaco LLC DBA To Gate Animal Clinic to Deco Associates
	17 Brookside Lane Number Street			10/2018			
	Sherman City	CT State	06784 ZIP Code				
	Insider's Name				\$	\$	
	insider's Name						
	Number Street						
ithii n in: iclud	City n 1 year before you filed isider? de payments on debts gu	aranteed o	or cosigned by		ayments or transf	er any property or	account of a debt that benefited
/ithin in in: nclud	City n 1 year before you filed isider? de payments on debts gu	d for bank aranteed o	ruptcy, did yo	an insider.	Total amount	er any property or	
/ithi i n in : nclud	City n 1 year before you filed isider? de payments on debts gu	d for bank aranteed o	ruptcy, did yo	an insider.			
ithin n in: oclud N l Y	City n 1 year before you filed isider? de payments on debts gu	d for bank aranteed o	ruptcy, did yo	an insider.	Total amount	Amount you still	Reason for this payment
/ithin n in: nclud ☑ N	City n 1 year before you filed isider? de payments on debts guilo fes. List all payments that	d for bank aranteed o	ruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
/ithin n in: nclud ☑ N	City n 1 year before you filed sider? de payments on debts gu lo Yes. List all payments that	d for bank aranteed o	ruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
/ithin n in: oclud ☑ N	City n 1 year before you filed sider? de payments on debts gu lo fes. List all payments that Insider's Name	d for bank aranteed of benefited	ruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
fithin n in: nclud N N	City n 1 year before you filed sider? de payments on debts gu lo fes. List all payments that Insider's Name	d for bank aranteed of benefited	ruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment

City

State

ZIP Code

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Debtor 1 Jennifer Lee Stepp Case number (if known)
First Name Middle Name Last Name

List all such matters, including personal injury and contract disputes.	cy, were you a party in any lawsuit / cases, small claims actions, divorce				-
☐ No					
Yes. Fill in the details.					
	Nature of the case	Court or agency	,		Status of the case
Vca Charlestowne Animal Hospital	employment signing bonus; Date				
Case title: VS Jennifer Stepp	filed: 06/19/2019	Charleston Cou	inty Clerk	of Court	— Pending
		Court Name			
		100 Broad St			On appeal
		Number Street			Concluded
		Charleston	SC	29401	
ase number 2019CV101150-1266		City	State	ZIP Code	
ase number	Foreclosure: POA dues collection	,			
DRIDGE LAKE PROPERTY OWNERS ASSOCIATION, INC. v.	and foreclosure action.; Date filed:	Superior Court	Litchfield		
COONS, ATTHEW 0. A/K/A	12/10/2018	Superior Court Litchfield Court Name			—— Pending
MATTHEW COONS Et Al		50 Field Ct			On appeal
		50 Field St, Number Street			Concluded
		Torrington	CT	06790	
ase number LLI-CV18-6020539-S		City	State	ZIP Code	
Yes. Fill in the information below.					
	Describe the property			Date	Value of the property
	Describe the property POA dues collection and	foreclosure action	1.		0.00
Yes. Fill in the information below.		foreclosure action	1.	Date 12/2018	
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name		foreclosure action	1.		0.00
Yes. Fill in the information below. Woodridge Lake POA		foreclosure action	1.		0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq.	POA dues collection and Explain what happened		1.		0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq.	Explain what happened Property was repose	sessed.	ì.		0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street	Explain what happened Property was repos Property was forect	sessed. osed.	n.		0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064	Explain what happened Property was reposed Property was forect Property was garnis	sessed. osed. shed.			0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2	Explain what happened Property was reposed Property was forect Property was garnis	sessed. osed. shed.			0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064	Explain what happened Property was reposed Property was forect Property was garnis	sessed. osed. shed.			0.00
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064	Explain what happened Property was reposed Property was forect Property was garnised Property was attact	sessed. osed. shed.		12/2018	\$ 0.00 \$ Value of the property
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064 City State ZIP 0	Explain what happened Property was repose Property was forecl Property was garnise Property was attack Describe the property	sessed. osed. shed.		12/2018 Date	\$ 0.00 \$ Value of the property
Yes. Fill in the information below. Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064 City State ZIP 0	Explain what happened Property was repose Property was forecl Property was garnise Property was attack Describe the property	sessed. osed. shed.		12/2018	\$_0.00
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven City State ZIP 0 Woodridge Lake Sewer District Creditor's Name	Explain what happened Property was repose Property was forecl Property was garnise Property was attack Describe the property	sessed. osed. shed.		12/2018 Date	\$ 0.00 \$ Value of the property
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven City State ZIP 0 Woodridge Lake Sewer District Creditor's Name 113 Brush Hill Road	Explain what happened Property was repose Property was forecl Property was garnise Property was attack Describe the property	sessed. osed. shed.		12/2018 Date	\$ 0.00 \$ Value of the property
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven City State ZIP 0 Woodridge Lake Sewer District Creditor's Name	Explain what happened Property was repose Property was forecl Property was garnise Property was attack Describe the property	sessed. osed. shed.		12/2018 Date	\$ 0.00 \$ Value of the property
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064 City State ZIP 0 Woodridge Lake Sewer District Creditor's Name 113 Brush Hill Road Number Street	Explain what happened Property was reposed Property was forected Property was garnised Property was attacted Property was attacted Property Property was attacted Property Property was attacted Property Propert	sessed. osed. shed. ned, seized, or lev		12/2018 Date	\$ 0.00 \$ Value of the property
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064 City State ZIP 0 Woodridge Lake Sewer District Creditor's Name 113 Brush Hill Road	Explain what happened Property was reposed Property was forecled Property was attacted Property was attacted Property was attacted Property Property was attacted Property Was reposed Property Property Was reposed Property Property Was reposed Property Prope	sessed. osed. shed. ned, seized, or lev		12/2018 Date	\$ 0.00 \$ Value of the property
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven City State ZIP C Woodridge Lake Sewer District Creditor's Name 113 Brush Hill Road Number Street PO Box 258	Explain what happened Property was reposed Property was forecles Property was attacted Property was attacted Property was attacted Property Property Property Property Property was reposed Property was reposed Property was forecles.	sessed. osed. shed. ned, seized, or lev sessed. osed.		12/2018 Date	\$ 0.00 \$ Value of the property
Woodridge Lake POA Creditor's Name C/O Ronald Barba Esq. Number Street 250 State St, #D-2 North Haven CT 064 City State ZIP 0 Woodridge Lake Sewer District Creditor's Name 113 Brush Hill Road Number Street PO Box 258	Explain what happened Property was reposed Property was forected Property was attacted Property was attacted Property was attacted Property Property was reposed Property was reposed Property was reposed Property was forected Property was garnised Property Was gar	sessed. osed. shed. ned, seized, or lev sessed. osed. shed.	ed.	12/2018 Date	\$ 0.00 \$ Value of the property

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Debtor 1 First Name Middle Name Last Name Case number (if known)_______

lo			
es. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
Creditor's Name		was taken	
Steutor's Ivalile			
Number Street			S
· · · · · · · · · · · · · · · · · · ·			
City State ZIP Code	Last 4 digits of account number: XXXX–		
	cy, was any of your property in the possession of	an assignee for the benefit of	of
litors, a court-appointed receiver, a cus	stodian, or another official?		
No ∕es			
List Certain Gifts and Contribu	tions		
in 2 years before you filed for bankrup	tcy, did you give any gifts with a total value of mo	re than \$600 per person?	
No			
Yes. Fill in the details for each gift.			
	- " "		
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Describe the gifts		Value
	Describe the gifts		Value \$
	Describe the gifts		Value
per person	Describe the gifts		Value \$\$
per person	Describe the gifts		Value \$\$
Person to Whom You Gave the Gift	Describe the gifts		\text{Value} \$
Person to Whom You Gave the Gift Number Street	Describe the gifts		\text{Value} \$
per person Person to Whom You Gave the Gift	Describe the gifts		\text{Value} \$ \$
Person to Whom You Gave the Gift Jumber Street Sity State ZIP Code	Describe the gifts		\text{Value} \$
Person to Whom You Gave the Gift Jumber Street Sity State ZIP Code Person's relationship to you		the gifts	\$ \$
Person to Whom You Gave the Gift Street Sity State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts	Dates you gave	\$ \$ Value
Person to Whom You Gave the Gift Street Sity State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		the gifts	\$ \$
Person to Whom You Gave the Gift Sumber Street City State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person		Dates you gave	\$ \$
Person to Whom You Gave the Gift Street Sity State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		Dates you gave	\$\$ Value
Person to Whom You Gave the Gift Jumber Street City State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person		Dates you gave	\$\$ Value
Person to Whom You Gave the Gift Jumber Street City State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person		Dates you gave	\$
Person to Whom You Gave the Gift Jumber Street City State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person		Dates you gave	\$
Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	\$

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Jennifer Lee Stepp

	otcy, did you give any gifts or contributions with a total value		to any charity?
☑ No ☑ Yes. Fill in the details for each gift or con	tribution		
Yes. Fill in the details for each gift or con			
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
			\$
Charity's Name			
			\$
Number Street			
City State ZIP Code			
6: List Certain Losses			
_	Describe any insurance coverage for the loss	ecause of theft, fire	Value of property
No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		Value of property
No Yes. Fill in the details. Describe the property you lost and how	Include the amount that insurance has paid. List pending insurance		lost
No Yes. Fill in the details. Describe the property you lost and how	Include the amount that insurance has paid. List pending insurance		
Yes. Fill in the details. Describe the property you lost and how	Include the amount that insurance has paid. List pending insurance		
No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Trans	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	\$
Poscribe the property you lost and how the loss occurred T: List Certain Payments or Transithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition proclude.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sefers tcy, did you or anyone else acting on your behalf pay or trans	Date of your loss	\$
Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Translithin 1 year before you filed for bankrup to be any attorneys, bankruptcy or proclude any attorneys, bankruptcy petition proclude. No Yes. Fill in the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Itcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	Date of your loss	\$
7: List Certain Payments or Translithin 1 year before you filed for bankrup on sulted about seeking bankruptcy or produde any attorneys, bankruptcy petition produced.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition? The parents or credit counseling agencies for services required in your behalf pay or transfreparing a bankruptcy petition?	Date of your loss Sfer any property to our bankruptcy.	\$o anyone you
Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Translithin 1 year before you filed for bankrup possulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition proclude. No Yes. Fill in the details.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition? The parents or credit counseling agencies for services required in your behalf pay or transfreparing a bankruptcy petition?	Date of your loss Sfer any property to our bankruptcy.	\$o anyone you
Person Who Was Paid Yes. Fill in the details. Describe the property you lost and how the loss occurred Tithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or piclude any attorneys, bankruptcy petition property of the property	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition? The parents or credit counseling agencies for services required in your behalf pay or transfreparing a bankruptcy petition?	Date of your loss Sfer any property to our bankruptcy.	\$ anyone you Amount of payments
7: List Certain Payments or Transition 1 year before you filed for bankrup consulted about seeking bankruptcy or piclude any attorneys, bankruptcy petition process. Fill in the details. Person Who Was Paid	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition? The parents or credit counseling agencies for services required in your behalf pay or transfreparing a bankruptcy petition?	Date of your loss sfer any property to ur bankruptcy. Date payment or	\$o anyone you

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Debtor 1 Jennifer Lee Stepp
First Name Middle Name Last Name
Last Name
Case number (if known)

	Description and value of any property tra	nsferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street				¢
				Ψ
City State ZIP Code				
Email or website address	_			
Person Who Made the Payment, if Not You				
omised to help you deal with your credit on the include any payment or transfer that you have a second or transfer that y				
	Description and value of any property tra	nsferred	Date payment or transfer was made	Amount of payme
Person Who Was Paid				\$
Number Street				•
				\$
City State ZIP Code				
ithin 2 years before you filed for bankrup ansferred in the ordinary course of your ledude both outright transfers and transfers ro not include gifts and transfers that you had No	business or financial affairs? made as security (such as the granting of		ortgage on your prop	perty).
	transferred	or debts paid in exchan		was made
Person Who Received Transfer				
Number Street				
Number Street City State ZIP Code				
City State ZIP Code				
City State ZIP Code Person's relationship to you				
City State ZIP Code Person's relationship to you Person Who Received Transfer				

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Case number (if known)_

Jennifer Lee Stepp

Debtor 1

are a beneficiary? (These are often called as No Yes. Fill in the details.		y to a self-settled trust	or similar device of wh	iich you
	Description and value of the proper	rty transferred		Date transfer was made
Name of trust				
t 8: List Certain Financial Accounts Within 1 year before you filed for bankrupto				enefit.
closed, sold, moved, or transferred? Include checking, savings, money market, brokerage houses, pension funds, coopera No Yes. Fill in the details.	or other financial accounts; certif atives, associations, and other fin	ficates of deposit; share ancial institutions.	es in banks, credit uni	
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street	xxxx	Checking Savings Money market Brokerage		\$
City State ZIP Code		Other		
Name of Financial Institution	XXXX	Checking		•
Number Street		Savings Money market		\$
Number Street City State ZIP Code				\$
City State ZIP Code Do you now have, or did you have within 1 securities, cash, or other valuables?	year before you filed for bankrupt	Money market Brokerage Other	ox or other depository	\$
City State ZIP Code Do you now have, or did you have within 1 securities, cash, or other valuables? V No	year before you filed for bankrupt Who else had access to it?	Money market Brokerage Other		Do you still have it?
City State ZIP Code Do you now have, or did you have within 1 securities, cash, or other valuables?		Money market Brokerage Other tcy, any safe deposit bo		Do you still

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Case number (if known)_

Jennifer Lee Stepp

Debtor 1

No Yes. Fill in the details.			
	Who else has or had access to it?	Describe the contents	Do you sti have it?
Name of Charge Facility	Name		□No
Name of Storage Facility	Name		Yes
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code	3		
9: Identify Property You Ho	ld or Control for Someone Else		
☑ No ☑ Yes. Fill in the details.	Where is the property?	Describe the property	Value
Owner's Name			\$
	Number Street		
Number Street			
	City State ZII	P Code	
City State ZIP Code		P Code	
	onmental Information	P Code	
Give Details About Environmental law means any federal, sacardous or toxic substances, wastes cluding statutes or regulations controlite means any location, facility, or proor used to own, operate, or utilize it, in azardous material means anything an	efinitions apply: state, or local statute or regulation cos, or material into the air, land, soil, subling the cleanup of these substance perty as defined under any environmental disposal sites.	oncerning pollution, contamination, relea urface water, groundwater, or other medi	um, e, or utilize
Give Details About Environmental law means any federal, sacardous or toxic substances, wastes cluding statutes or regulations controllite means any location, facility, or proor used to own, operate, or utilize it, it azardous material means anything an ubstance, hazardous material, polluta	efinitions apply: state, or local statute or regulation cos, or material into the air, land, soil, subling the cleanup of these substance perty as defined under any environmental disposal sites. environmental law defines as a hazant, contaminant, or similar term.	encerning pollution, contamination, relea urface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxi	um, e, or utilize
Give Details About Environmental law means any federal, searandous or toxic substances, wastes cluding statutes or regulations control ite means any location, facility, or proor used to own, operate, or utilize it, in azardous material means anything an ubstance, hazardous material, polluta ort all notices, releases, and proceeding the policy of the control of the	efinitions apply: state, or local statute or regulation cos, or material into the air, land, soil, subling the cleanup of these substance perty as defined under any environmental disposal sites. environmental law defines as a hazant, contaminant, or similar term.	encerning pollution, contamination, relea urface water, groundwater, or other medi s, wastes, or material. ental law, whether you now own, operate rdous waste, hazardous substance, toxi	um, , or utilize c
Give Details About Environmental law means any federal, sacardous or toxic substances, wastes acluding statutes or regulations control ite means any location, facility, or proor used to own, operate, or utilize it, it is azardous material means anything an ubstance, hazardous material, pollutatort all notices, releases, and proceeding	efinitions apply: state, or local statute or regulation cos, or material into the air, land, soil, subling the cleanup of these substance perty as defined under any environmental disposal sites. environmental law defines as a hazant, contaminant, or similar term.	oncerning pollution, contamination, releating pollution, contamination, releating the second policy of the second policy of when they occurred.	um, , or utilize c
Give Details About Environmental law means any federal, searandous or toxic substances, wastes cluding statutes or regulations controlite means any location, facility, or proor used to own, operate, or utilize it, it azardous material means anything an ubstance, hazardous material, polluta ort all notices, releases, and proceedings any governmental unit notified your No	efinitions apply: state, or local statute or regulation cos, or material into the air, land, soil, subling the cleanup of these substance perty as defined under any environmental disposal sites. environmental law defines as a hazant, contaminant, or similar term.	oncerning pollution, contamination, releating pollution, contamination, releating the second policy of the second policy of when they occurred.	um, , or utilize c
Give Details About Environmental law means any federal, sacardous or toxic substances, wastes cluding statutes or regulations controlite means any location, facility, or proor used to own, operate, or utilize it, is azardous material means anything an ubstance, hazardous material, polluta ort all notices, releases, and proceedings any governmental unit notified your No	efinitions apply: state, or local statute or regulation co s, or material into the air, land, soil, su colling the cleanup of these substance perty as defined under any environme including disposal sites. environmental law defines as a haza nt, contaminant, or similar term. ngs that you know about, regardless of that you may be liable or potentially l	encerning pollution, contamination, releating the second s	um, , or utilize c nental law?

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Debtor 1 First Name Middle Name Last Name Case number (if known)_______

Have you notified any governmen	ntal unit of any release of hazardou	us material?	
☑ No	,		
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Name of Site	Governmental unit		
Number Street	Number Street		
	City State 2	ZIP Code	
City State	ZIP Code		
lavo vou boon a party in any judi	cial or administrative proceeding	under any environmental law? Include settlements	e and ordere
✓ No	cial of administrative proceeding	under any environmentariaw : include Settlements	s and orders.
☑ No ☑ Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the
	ocurr or agonoy	Tradailo or allo capo	case
Case title			☐ Pending
	Court Name		☐ On appeal
	Number Street		Concluded
Case number	City Sta	ate ZIP Code	
☐ A sole proprietor or self-e	mployed in a trade, profession, or pility company (LLC) or limited liab	ness or have any of the following connections to a r other activity, either full-time or part-time oility partnership (LLP)	ny business?
_	naging executive of a corporation		
☐ An owner of at least 5% o	f the voting or equity securities of	a corporation	
No. None of the above applie	s. Go to Part 12.		
	ve and fill in the details below for	each business.	
Tailwaggers at Toll Gate	Describe the nature of t		
Business Name	Pet Boarding Facility	Do not include Social S	Security number or ITIN.
568 Torrington Road		EIN: <u>8 1 - 2</u> 1	1 3 0 6 3 7
Number Street			
		Dates business existed	1
Litchfield CT	Name of accountant or Gwen Burgess	From 09/30/2015	To Current
City State	ZIP Code		
Barking Mad	Describe the nature of t		
Business Name	Real Estate Holding Co	Do not include Social S	Security number or ITIN.
568 Torrington Road		EIN: <u>8 2 -2 0</u>	<u>9 3 1 2 4</u>
Number Street		Dates business existed	
	News of a second of the		
Litchfield CT	Name of accountant or 06759 Gwen Burgess	bookkeeper From	To Current
	ZIP Code		

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Case number (if known

Jennifer Lee Stepp

Debtor 1

Last Name Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Jemaco LLC (d/b/a Toll Gate Animal Clin Vet Clinic **EIN**: 4 7 -5 0 6 5 2 2 0 568 Torrington Road Number Street Dates business existed Name of accountant or bookkeeper To Current Litchfield CT 06759 Gwen Burgess City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ✓ No ☐ Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jennifer Lee Stepp /s/ Matthew Ormiston Coons Signature of Debtor 1 Signature of Debtor 2 Date 10/29/2019 Date 10/29/2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ✓ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? √ No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1

First Name Middle Name Last Name

Continuation Sheet for Official Form 107

Case number (if known)_

9) Lawsuits

Case Title: WOODRIDGE LAKE PROPERTY OWNERS ASSOCIATION, INC. v. COONS, MATTHEW O. A/K/A MATTHEW COONS Et Al

Case Number: LLI-CV18-6020539-S

Court Name: Litchfiled Clerk of Court

Court Address: 50 Filed St, Torrington, CT 06790

Case Status: Pending

Nature of the case: Foreclosure: HOA foreclosure

Case Title: MIDWEST BUSINESS CAPITAL, A DIVISION OF UNITED MID v. BARKING MAD,

LLC Et Al

Case Number: LLI-CV19-6021903-S

Court Name: Litchfiled Clerk of Court

Court Address: 50 Filed St, Torrington, CT 06790

Case Status: Pending

Nature of the case: Foreclosure: Foreclosure and collection on business

property; Date filed: 05/07/2019

Case Title: DITECH FINANCIAL LLC v. COONS, MATTHEW

Case Number: LLI-CV19-6023495-S

Court Name: Litchfiled Clerk of Court

Court Address: 50 Filed St, Torrington, CT 06790

Case Status: Pending

Nature of the case: Foreclosure: Foreclosure of Debtor's prior residence; Date

filed: 09/27/2019

10) Repossessions, foreclosures and garnishments

Creditor's Name: Midwest Business Capital

Creditor's Address: c/o Thomas McDermott Jr Esq, Litchfield, CT, 6759

Description of the Property: Foreclosure and collection on business property

Explain what happened: Property was foreclosed

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Debtor 1

First Name Middle Name Last Name

Case number (if known)__

Continuation Sheet for Official Form 107

Date: 05/2019

Value of the Property: Unknown

Creditor's Name: Ditech Financial Llc

Creditor's Address: 332 Minnesota St Ste 610, Saint Paul, MN, 55101

Description of the Property: Foreclosure of Debtor's prior residence

Explain what happened: Property was foreclosed

Date: 09/2019

Value of the Property: \$0.00

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Fill in this in	formation to iden	tify your case:		
Debtor 1	Jennifer Lee Stepp			
•	First Name Matthew Ormiston Co	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	
		the District of South Carolina		
Case number	Bankrupicy Court for	(ife District of South Garonna		
(If known)			_	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Credinformation below.	editors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Ditech Financial Llc	☑ Surrender the property.	✓ No
Description of 110 Brynmoor Ct property securing debt:	 ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	Yes
Creditor's name: Description of property securing debt: Westlake Financial Svc Ford F150	 ☑ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	✓ No ☐ Yes
Creditor's DECO Associates name: Description of property securing debt: Creditor's DECO Associates name: Lien on one of Debtor's LLC assets	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	✓ No ☐ Yes
Creditor's mame: Description of property securing debt: Woodridge Lake POA 110 Brynmoor Ct	 ☑ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	✓ No ☐ Yes

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Jennifer Lee Stepp & Matthew Ormiston Coons

Debtor

Case number (If known)_____

Dart 2	List Vour Unavnired Personal Property Leases	

you listed in <i>Schedule G: Executory Contracts and U</i> ate leases. <i>Unexpired leases</i> are leases that are still in all property lease if the trustee does not assume it. 11 U	n effect; the lease period has not yet
ases	Will the lease be assumed?
	□No
	✓ Yes
	□ No
	✓ Yes
	No
	□Yes
	□ No □ Yes
	Yes
	□No
	── □Yes
	□No
	□ NO
	Yes
	☐Yes
indicated my intention about any property of my esta	☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes
	☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes
ired lease.	☐ No☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes
	ate leases. <i>Unexpired leases</i> are leases that are still i I property lease if the trustee does not assume it. 11

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Debtor 1

First Name Middle Name Last Name

Case number (if known)_

Continuation Sheet for Official Form 108

1) Creditors who have secured claims

Sheffield Other - Snow Plow No exemptions surrender

Financial Co

Case 19-05688-dd Doc 1-1 Filed 10/29/19 Entered 10/29/19 17:15:34 Fill in this information to identify your case: Check one box only as directed in this form and in Form 122A-1Supp: Jennifer Lee Stepp Debtor 1 Middle Name 1. There is no presumption of abuse. Matthew Ormiston Coons Debtor 2 (Spouse, if filing) First Name Middle Name Last Name 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 United States Bankruptcy Court for the: District of South Carolina Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of (If known) qualified military service but it could apply later. ☐ Check if this is an amended filing Official Form 122A—1 Chapter 7 Statement of Your Current Monthly Income 10/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ■ Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column B Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Copy Net monthly income from a business, profession, or farm Debtor 1 Debtor 2 6. Net income from rental and other real property \$_ Gross receipts (before all deductions) Ordinary and necessary operating expenses Сору Net monthly income from rental or other real property here -7. Interest, dividends, and royalties

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8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	Column A Debtor 1 \$	Column B Debtor 2 or non-filing spouse	
8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	Debtor 1	Debtor 2 or non-filing spouse	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\$ For your spouse\$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired	\$	\$	
under the Social Security Act. Instead, list it here: For you\$ For your spouse\$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired		· · · · · · · · · · · · · · · · · · ·	•
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired			
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired			
benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired			
pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$. \$	
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.			
	\$	\$	
	\$	\$	
Total amounts from separate pages, if any.	- \$	+ \$	_
Г		7	·
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	+ _{\$}	= _{\$}
	Ψ	Ψ	Total current
Part 2: Determine Whether the Means Test Applies to You			monthly income
Part 2. Determine whether the means rest Applies to rou			
12. Calculate your current monthly income for the year. Follow these steps:		_	
12a. Copy your total current monthly income from line 11		Copy line 11 here	\$
Multiply by 12 (the number of months in a year).			x 12
12b. The result is your annual income for this part of the form.		12b.	\$
13. Calculate the median family income that applies to you. Follow these steps:			
Fill in the state in which you live.			
Fill in the number of people in your household.			
Fill in the median family income for your state and size of household		12	\$
Fill in the median family income for your state and size of household		13.	Ψ
14. How do the lines compare?			
14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There</i> Go to Part 3.	is no presump	tion of abuse.	
14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption</i> Go to Part 3 and fill out Form 122A–2.	n of abuse is de	etermined by Form 122	A-2.

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otor 1 Jennifer Lee Stepp First Name Middle Name Last Name	Case number (if known)
Part 3: Sign Below	
By signing here, I declare under penalty of perjury th	nat the information on this statement and in any attachments is true and correct.
🗴 /s/ Jennifer Lee Stepp	/s/ Matthew Ormiston Coons
Signature of Debtor 1	Signature of Debtor 2
Date 10/29/2019 MM / DD / YYYY	Date 10/29/2019 MM / DD / YYYY
If you checked line 14a, do NOT fill out or file For	rm 122A–2.
If you checked line 14h fill out Form 1224_2 and	I file it with this form

Doc 1-1 Filed 10/29/19 Case 19-05688-dd Entered 10/29/19 17:15:34 ne 30 of 42 Fill in this information to identify your case: Jennifer Lee Stepp Debtor 1 Last Name Matthew Ormiston Coons Debtor 2 (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: District of South Carolina Case number (If known) Check if this is an amended filing Official Form 122A—1Supp Statement of Exemption from Presumption of Abuse Under § 707(b)(2) File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C). Part 1: Identify the Kind of Debts You Have 1. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave on line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then submit this supplement with the signed Form 122A-1. ☐ Yes. Go to Part 2. Part 2: Determine Whether Military Service Provisions Apply to You 2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))? No. Go to line 3. Tes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1)); 32 U.S.C. § 901(1). No. Go to line 3. Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then submit this supplement with the signed Form 122A-1. 3. Are you or have you been a Reservist or member of the National Guard? No. Complete Form 122A-1. Do not submit this supplement. Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1) No. Complete Form 122A-1. Do not submit this supplement. Yes. Check any one of the following categories that applies: If you checked one of the categories to the left, go to I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty. Form 22A-1. On the top of page 1 of Form 22A-1, check box 3, The Means Test does not apply now, and sign I was called to active duty after September 11, 2001, for at least Part 3. Then submit this supplement with the signed 90 days and was released from active duty on Form 22A-1. You are not required to fill out the rest of which is fewer than 540 days before I file this bankruptcy case. Official Form 22A-1 during the exclusion period. The exclusion period means the time you are on active duty I am performing a homeland defense activity for at least 90 days.

or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

I file this bankruptcy case.

I performed a homeland defense activity for at least 90 days,

_, which is fewer than 540 days before

ADT Security Services P.O. Box 650485 Dallas, TX 75265

Aargon Collection Agency 8668 Spring Mountain Road Las Vegas, NV 89117

Accounting and More/Gwen Burgess P.O. Box 550 Litchfield, CT 06759

Alliance One Re: Target Credit Card Target Card Services PO Box 660170 Dallas, TX 75266

Ally Financial 200 Renaissance Ctr # B0 Detroit, MI 48243

American Express Blue P.O. Box 981535 El Paso, TX 79998

American Express Business Card Delta Skymiles 200 Vesey Street New York, NY 10285-3106

American Express Business Gold Card 200 Vesey Street New York, NY 10285-3106

American Express Delta Reserve P.O. Box 981535 El Paso, TX 79998

American Express Delta Reserve Card P.O. Box 650448 Dallas, TX 75265

Amerigas 358 Torrington Road Litchfield, CT 06759

BARR Credit Services (collection firm for Zoe Zoetis US 812 Springdale Dr Exton, PA 19341

Barclays Bank Delaware P.O. Box 8801 Wilmington, DE 19801

Bayer Healthcare LLC PO Box 223075 Pittsburgh, PA 15251-2075

Best Buy Credit Card Citi Retail Services P.O. Box 790441 St Louis, MO 63179-0441 Boehringer Ingelheim/Merial P.O. Box 281348 Atlanta, GA 30384

Capehart Scatchard Re: Swift Financial PO Box 5016 Mount Laurel, 08054

Capehart Scatchard Re: Swift Financial 8000 Midatlantic Dr., Ste. 300S Mount Laurel, NJ 08054

Capital One P.O. Box 71083 Charlotte, NC 28272

Capital One Spark Business Card P.O. Box 71083 Carlotte, NC 28272-1083

Charles Towne Animal Hospital 850 Savannah Hwy Charleston, SC 29407

Citi Cards P.O. Box 70166 Philadelphia, PA 19176

CitiBank P.O. Box 9001037 Louisville, KY 40290

Clover TeleCheck Services Inc. P.O. Box 60028 City of Industry, CA 91716

Commercial Collections of America LLC 24301 Southland Dr. Suite 310 Hayward, CA 94545

Contract Callers (re: Amerigas) PO Box 660288 Dallas, TX 75266

Credit Collections Bureau Professional Debt C PO Box 90508 Sioux Falls, SD 57109

DECO Associates Donald Coons 17 Bookside Lane Sherman, CT 06784

Damien Oskwarek PO Box 176 Litchfield, CT 06759

Damien Oskwarek 47 Slick Rook Rd Murphy, NC 28906 De Lage Landen Financial Services INC P.O. Box 41602 Philadelphia, PA 19101

Diamondback Drugs, A Wedgewood Village Pharma 7631 East Indian School Road Scottsdale, AZ 85251

Discover P.O. Box 71084 Charlotte, NC 28272

Ditech Financial Llc 332 Minnesota St Ste 610 Saint Paul, MN 55101

Ditech Financial Llc PO Box 7153 Pasadena, 91109

Drug Enforcement Administration 8701 Morrissette Dr Springfield, VA 22152

Eastman Credit Union Visa P.O. Box 1989 Kingsport, TN 37662

Eversource PO Box 56002 Boston, MA 02205

Eversource P.O. Box 56002 Boston, MA 02205-6002

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Ferris Gorra 53 Carlson Ridge New Milford, CT 06776

Final Gift Crematorium 2 Daniels Way Cranston, RI 02921

First Veterinary Supply 17187 North Laurel Park Drive Suite 300 Livonia, MI 48152

Gap Visa/Synchrony Bank P.O. Box 960017 Orlando, FL 32896

Goshen Tax Collector 42A North Street Goshen, CT 06756 Harvard Drug Group re: First Veterinary Suppl 1821 Reliable Parkway Chicago, IL 60686

Henry Schein 400 Metro Place North Dublin, OH 43017

Highland Capital Corporation 5 Center Avenue Little Falls, NJ 07424

Hook and Ladder Oil 74 Mygatt Road New Preston, CT 06777

IRS Centralized & Insolvency Operation PO Box 7346 Philadelphia, PA 19144

Idexx P.O. Box 101327 Atlanta, GA 30392

Indeed, Inc Mail Code 5160 PO Box 660367 Dallas, TX 75266-0367

Jeffery Driesen 343 Clayton Dr Charleston, SC 29414

Kabbage 925B Peachtree Street NE Suite 1688 Atlanta, GA 30309

Kohls Card PO Box 2983 Milwaukee, WI 53201

Lawrence Andrea Attorney at Law 23 South Main Street Norwalk, CT *06854

Litchfield Hills Pediatrics 481 Bantam Road Litchfield, CT 06759

Litchfield Property Care P.O. Box 1751 Litchfield, CT 06759

MCCALLA RAYMER LEIBERT PIERCE LLC 50 WESTON STREET Hartford, CT 06120

MWI Animal Health P.O. Box 5717 Boise, ID 83705 Medical University of South Carolina (Finley 1 Poston Rd. Ste 350 Charleston, SC 29407

Medical University of South Carolina (Jennife 1 Poston Rd. Ste 350 Charleston, SC 29407

Midwest Business Capital c/o Thomas McDermott Jr Esq 21 South St Litchfield, CT 6759

Midwest Business Capital c/o Thomas McDermott Jr Esq 21 South St Litchfield, CT 06759

Midwest Veterinary Supply P.O. Box 856500 Minneapolis, MN 55485-6500

Mike Kent Carpentry 259 Brush Hill Road Litchfield, CT 06759

Optimum 622 Torrington Road Litchfield, CT 06759

Patterson Patterson Vet Supply Inc 28905 Network Place Chicago, IL 60673

Paypal PO Box 45950 Omaha, NE 68145-0950

Paypal/Swift Capital 3505 Silverside Road Suite 200 Wilmington, DE 19810

Paypal/Swift Capital (see above their listed 3505 Silverside Road Suite 200 Wilmington, DE 19810

Primary Capital 80 Main Street St 550 West Orange, NJ 07052

ReadyRefresh by Nestle PO Box 856192

Louisville , KY 40285 Royal Canin 500 Fountain Lakes Boulevard Suite 100 Saint Charles, MO 63301

Sheffield Financial Co 2554 Lewisville Clemmons Clemmons, NC 27012

Sheffield Financial Co P.O. Box 580229 Charlotte, NC 28258

State of CT Dept of Revenue Services P.O. Box 5089 Hartford, CT 06102-5089

State of CT SS: Goshen, Joseph Parillo, State PO Box 137 Watertown, CT 06795

State of CT. Dept. Of Consumer Protection **Drug Control Division** 450 Columbus Blvd Hartford, CT 06106

Syncb/Amazon Po Box 965015 Orlando, FL 32896

Syncb/Gapdc Po Box 965005 Orlando, FL 32896

TIAA Bank 1700 Lincoln Street Lower Level 3 - Dept #1608 Denver, CO 80203

Target Red Card P.O. Box 673 Minneapolis, MN 55440

Telecom Self Reported Po Box 4500 Allen, TX 75013

Torrington Maintenance Supply 462 Main Street Rear Torrington, CT 06790

Town of Litchfield PO Box 465 Thomaston, CT 06787

Town of Litchfield P.O. Box 356 Litchfield, CT 06759

Town of Litchfield Tax Collector PO Box 356 Litchfield, CT 06759

Town of Litchfield Tax Collector P.O. Box 356 Litchfield, CT 06759

Town of Litchfield Water Pollution Control PO Box 343 Litchfield, CT 06759

Travelers Insurance PO BOX 660317 Dallas, TX 75266-0317

USA Hauling and Recycling Inc. 185 Torrington Rd Winsted, CT 06098

USDOJ Hartford Resident Office 716 Brook St Suite 110 Rocky Hill, CT 06067

United Health Care Oxford P.O. Box 1697 Newark, NJ 07101-1697

United Midwest Savings Bank 6460 Busch Blvd Ste 201 Columbus, OH 60686

VCA Charles Towne Animal Hospital 850 Savannah Highway Charleston, SC 29407

VCA Charlestowne Animal Hospital 850 Savannah Hwy Charleston, SC 29407

Volkswagen Credit Inc 1401 Franklin Blvd Libertyville, IL 60048

Vw Credit Inc 1401 Franklin Blvd Libertyville, IL 60048

WB Mason Company Inc 59 Centre Street Brockton, MA 02301

Webster Bank 281 Meadow Street Waterbury, CT 06702

Webster Bank Credit Card P.O. Box 790408 St. Oouis, MO 63179-0408

Westlake Financial PO Box 76809 Los Angeles, CA 90054-0809 Westlake Financial Svc 4751 Wilshire Blvd Ste 1 Los Angeles, CA 90010

Woodridge Lake POA C/O Ronald Barba Esq. 250 State St, #D-2 North Haven, CT 06473

Woodridge Lake POA 260 E. Hyerdale Drive Goshen, CT 06756

Woodridge Lake Sewer District 113 Brush Hill Road PO Box 258 Goshen, CT *06756

Zoetis US (see above the associated collecti P.O. Box 419022 Boston, MA 02241-9022

United States Bankruptcy Court District of South Carolina

In re:	Jennifer Lee Stepp & Matthew Ormiston Coons	Case No.	
	Debtor(s)	Chapter	7

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	10/29/2019	/s/ Jennifer Lee Stepp	
		Signature of Debtor	
		/s/ Matthew Ormiston Coons	
		Signature of Joint Debtor	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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United States Bankruptcy Court

	District of South Carolina	
Iı	re Jennifer Lee Stepp & Matthew Ormiston Coons	
		Case No
De	ebtor	Chapter 7
	DISCLOSURE OF COMPENSATION OF ATTORNEY	FOD DERTOD
	DISCLOSURE OF COMPENSATION OF ATTORNET	TORDEDIOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify the above named debtor(s) and that compensation paid to me within one ye petition in bankruptcy, or agreed to be paid to me, for services rendered the debtor(s) in contemplation of or in connection with the bankruptcy of	ar before the filing of the or to be rendered on behalf of
] <u>F</u>	LAT FEE	
	For legal services, I have agreed to accept	\$
	Prior to the filing of this statement I have received	\$_3,750.00
	Balance Due	\$3,750.00
] <u>R</u>	ETAINER	
	For legal services, I have agreed to accept a retainer of	\$
	The undersigned shall bill against the retainer at an hourly rate of	\$
	[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Capproved fees and expenses exceeding the amount of the retainer.	Court
2.	The source of the compensation paid to me was:	
	Debtor Other (specify)	
3.	1 1	
	Debtor Other (specify)	
4.	I have not agreed to share the above-disclosed compensation with are members and associates of my law firm.	any other person unless they
	I have agreed to share the above-disclosed compensation with a or e not members or associates of my law firm. A copy of the Agreement, togethe people sharing the compensation is attached.	•
5.	In return of the above-disclosed fee, I have agreed to render legal service bankruptcy case, including:	e for all aspects of the

whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining

- required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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d. [Other provisions as needed]
All aspects of bankruptcy litigation with the exception of any adversary litigation.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Adversary litigation

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/29/2019

/s/ Sean Markham, 76088

Date

Signature of Attorney

Markham Law Firm, LLC

Name of law firm PO Box 20074 Charleston, SC 29413 888-327-0054 sean@markhamlawsc.com